

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BD.

2009 APR 24 AM 11:32

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quick For State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Brian Quick

Political Party (if applicable)

Democratic

Office Sought

State Representative

District (if Senate or House)

15

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

1255

Logged In

Scanned

Computer

Audited

WRS WRS

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Shirley Shubert
SIGNATURE OF PERSON FILING REPORT

641-394-5319
TELEPHONE

4-23-09
DATE SIGNED

I AM FILING A _____ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date)

Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED July 19, 2004

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 5682.31

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

5050.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 10,732.31

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

913 3864.85

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

3,914.85

Schedule F: Loan Repayments total (Attach Schedule F)

913 6867.46

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 16812.46

**UNPAID BILLS (From Schedule D - Attach Schedule D)

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND
CAMPAIGN DISCLOSUREEXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT
2003 APR 24 APR 11 32

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/18/04	ID# CK#0290	Dairy Days Parade Fredericksburg, Ia 50630	Parade entry fee	\$ 50.00
06/04/04	ID# CK#0291	H and H Foods (Brad Sherburne) 207 N. Pleasant Hill New Hampton, Ia. 50659	parade candy	24.40
06/17/04	ID# CK#0292	Sandy's Sign Shop N. Linn Ave New Hampton, Ia. 50659	Signs	2123.95
06/17/04	ID# CK#0293	Screen Prints 651 W. Milwaukee New Hampton, Ia 50659	Parade T-shirts	101.12
07/06/04	ID# CK#0294	Messersmith Promotions 412 N. Chestnut Ave. New Hampton, Ia 50659	Stickers	284.58
07/06/04	ID# CK#0295	Professional Office Supply P.O. Box 450 Waterloo, Ia 50704	Brochures	408.80
07/15/04	ID# CK#0296	Anita Quirk 415 N. Chestnut Ave New Hampton, Ia 50659	Reimbursement for cost incurred to conferences	600.00
07/15/04	ID# CK#0300	State Treasurer of Iowa State Capitol Des Moines, Ia 50309	Flags	156.00
SUB-TOTAL				\$ 3748.85
TOTAL (If last page of this schedule)				\$ 3748.85

Reimb for 2 trips, 2 nights @ 147/night
+ parking fee, per cand 10-29-04

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(j).)

Page 01 of 02

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
07/15/04	ID# CK#0301	Treasure of the State of Iowa State Capitol Des Moines, Ia 50309	Pins for CSG conference	\$ 40.00
07/15/04	ID# CK#0302	Quality Inn and Suites Des Moines, Ia. 50309	fee for fundraiser	76.00
May 28	ID# CK#289	Alta Vista Days Alta Vista IA	Contribution for Parade #50 eschert	\$50.00
	ID# CK#	Check # 289 was issued to this office as escheat of unidentifiable funds,		
	ID# CK#	dated 4-29-04 \$50 over in bank - this was		
	ID# CK#	to reconcile - should not be added to expenditures.		
	ID# CK#	IECDB Staff Aud. for		
	ID# CK#			

9/13/16.00 SUB-TOTAL \$116.00 166.00
TOTAL (if last page of this schedule) \$3864.85 394.85
9/13 3864.85

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(b).)

Page 02 of 02

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE**COMMITTEE NAME** (Must be same as on Statement of Organization)

Brian Quirk for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 01
 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Brian Quirk

Political Party (if applicable)

Democrat

Office Sought

District (if Senate or House)

State Representative

15

**FORM
DR-2**

(Rev. 07/2004)

**DISCLOSURE
REPORT**

For Office Use Only

Comm. #

1255

Logged In

SW

JK

Scanned

Computer

WRS

Audited

9-22-04

Late reports are subject to
possible civil and criminal
penalties.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A Disclosure 7-19-04 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
 (report date) Indicate by # ☒

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the
committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period or must be zero if this is first report filed.)

513 5703.81 \$ 5733.81

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 5050.00

Schedule F: Loans Received total (Attach Schedule F) 0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL\$ 10783.81

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 3864.85

Schedule F: Loan Repayments total (Attach Schedule F) 0.00

CASH ON HAND at the end of this reporting period (if final report balance must
be zero) (Attach DR-3)

513 6888.96 \$ 6918.96

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 0.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 0.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 0.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
✓ 06/04/04	ID# 6070 CK# 3026	Iowa LAW PAC 521 East Locust St. Fl 3rd Des Moines, Ia 50309-1939		\$400.00	<input type="checkbox"/>
✓ 06/21/04	ID# 6067 CK# 3108	Iowa Health PAC 6750 Westown Parkway #100 West Des Moines, Ia 50266		250.00	<input checked="" type="checkbox"/>
06/21/04	ID# CK# 2668	Steven Ackerson 1634 NW 131st ST. Clive, Ia 50325		100.00	<input checked="" type="checkbox"/>
06/21/04	ID# CK# 8394	Paul Schwickerath 308 S. Walnut New Hampton, Ia. 50659		20.00	<input checked="" type="checkbox"/>
06/21/04	ID# CK# 5051	Penny Moellers 336 4th Ave., E. Cresco, Ia 52136		20.00	<input checked="" type="checkbox"/>
✓ 07/13/04	ID# 6056 CK# 3221	Bankers Unite in Legislative Decisions 8800 NW 62nd Avenue Johnston, Ia 50131-6200		500.00	<input checked="" type="checkbox"/>
✓ 07/13/04	ID# 6056 CK# 3253	Bankers Unite in Legislative Decisions 8800 NW 62nd Avenue Johnston, Ia 50131-6200		250.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 8259	Kenneth Benning 2985 270th St Fredericksburg, Ia 50630		25.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 8103	Donald Blazek 2904 Ridgeway Lane Lawler, Ia 52154		200.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 3264	Gerald Carney P.O. Box 242 New Hampton, Ia. 50659		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1815.00	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 01 of 05
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
07/13/04	ID# CK# 9086	James Carr 414 N. Chestnut Ave. New Hampton, Ia. 50659		\$50.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 1157	Dale Gates 901 Rural St New Hampton, Ia. 50659		150.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 3097	Jack Gorman 610 E. Main St New Hampton, Ia 50659		25.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 9897	Bryan Hugeback 901 Sunrise St New Hampton, Ia 50659		50.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 4703	Leon Hugeback 409 S. 5th Ave New Hampton, Ia 50659		25.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 10261	Roger Katz 109 E. Main St New Hampton, Ia 50659		10.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 5467	Eileen Kennedy 409 N. Chestnut Ave New Hampton, Ia. 50659		25.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 11271	Kevin Kennedy 203 S. Walnut New Hampton, Ia 50659		50.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 8153	Michael Kennedy 929 Ash Drive New Hampton, Ia. 50659		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 5618	Ralph Kennedy 622 N. Foley Ave. New Hampton, Ia 50659		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 535.00	
TOTAL (If last page of this schedule)				\$	

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Page 02 of 05
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
07/13/04	ID# CK# 2735	Richard Kriener 2580 Josephson Ct New Hampton, Ia 50659		\$25.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 3889	Martin Larsen 302 N. Pleasant Hill New Hampton, Ia 50659		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 2965	Perry Laures 213 S Linn Ave New Hampton, Ia 50659		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 2147	Stan Laures 2325 S. Linn Ave New Hampton, Ia 50659		50.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 6957	Vernon Laures 2187 S. Linn Ave New Hampton, Ia 50659		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 2516	Wendal Liddle P.O. Box 3 New Hampton, Ia 50659		75.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 1828	Walter Murphy P.O. Box 345 New Hampton, Ia 50659		50.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 9566	John O'Byrne 817 E. 3rd St Cresco, Ia 52136		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 7953	Duane Quirk 1020 Parker St New Hampton, Ia 50659		25.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 2738	Lori Quirk 420 W. Main St New Hampton, Ia 50659		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 650.00	
TOTAL (If last page of this schedule)				\$	

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Page 03 of 05
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 88B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
07/13/04	ID# CK# 479	Cletus Ries 1909 Gilmore Ave New Hampton, Ia 50659		\$100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 5790	Andrew Schwickerath 1705 - 155th St New Hampton, Ia 50659		25.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 8479	Chip Schwickerath 1970 N. Linn Ave New Hampton, Ia 50659		50.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 1435	Robert Soukup 213 S. Locust New Hampton, Ia 50659		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 7299	John Tekippe 215 Waukec Ave. Waukec, Ia. 50263		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 5636	Richard Tekippe 903 E. Main St New Hampton, Ia 50659		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 2653	Scott Thomson P.O. Box 57 Cresco, Ia. 50659		50.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 9827	Bruce Weigel 707 Maple St. Elma, Ia 50628		100.00	<input checked="" type="checkbox"/>
07/13/04	ID# CK# 5982	Harry Zipsc 203 E. Milwaukee St New Hampton, Ia 50659		50.00	<input checked="" type="checkbox"/>
07/15/04	ID# 9659 CK# 1260	Federation of Iowa Insurers P.O. Box 1756 Des Moines, Ia. 50306-1756		500.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 1175.00

TOTAL (If last page of this schedule)

\$

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Page 04 of 05
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
07/15/04	ID# CK# 2937	Timothy Gannon 205 Bluff St. Mingo, Ia 50168		\$25.00	<input checked="" type="checkbox"/>
07/15/04	ID# 6058 CK# 2426	Iowa Chiropractic Society 1605 N. Ankeny Blvd., Suite 100 Ankeny, Ia. 50021-4159		200.00	<input checked="" type="checkbox"/>
07/15/04	ID# 6046 CK# 3803	Justice For All PAC 218 - 6th Ave., Ste. 526 Des Moines, Ia 50309-4091		100.00	<input checked="" type="checkbox"/>
07/15/04	ID# CK# 7660	David Palmer 213 SW Flynn Dr. Ankeny, Ia 50021		50.00	<input checked="" type="checkbox"/>
07/15/04	ID# 6107 CK# 3407	Qwest IPAC 925 High St., 9S9 Des Moines, Ia 50309		250.00	<input checked="" type="checkbox"/>
07/15/04	ID# 6498 CK# 1217	Well Pac 636 Grand Ave Station 13 Des Moines, Ia 50309		250.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 875.00

TOTAL (If last page of this schedule)

\$ 5050.00

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Page 05 of 5
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/18/04	ID# CK#0290	Dairy Days Parade Fredericksburg, Ia 50630	Parade entry fee	\$ 50.00
06/04/04	ID# CK#0291	H and H Foods (Brad Sherburne) 207 N. Pleasant Hill New Hampton, Ia. 50659	parade candy	24.40
06/17/04	ID# CK#0292	Sandy's Sign Shop N. Linn Ave New Hampton, Ia. 50659	Signs	2123.95
06/17/04	ID# CK#0293	Screen Prints 651 W. Milwaukee New Hampton, Ia 50659	Parade T-shirts	101.12
07/06/04	ID# CK#0294	Messersmith Promotions 412 N. Chestnut Ave. New Hampton, Ia 50659	Stickers	284.58
07/06/04	ID# CK#0295	Professional Office Supply P.O. Box 450 Waterloo, Ia 50704	Brochures	408.80
07/15/04	ID# CK#0296	Anita Quirk 415 N. Chestnut Ave New Hampton, Ia 50659	Reimbursement for cost incurred to conferences	600.00
07/15/04	ID# CK#0300	State Treasurer of Iowa State Capitol Des Moines, Ia 50309	Flags	156.00
* Per card 10-29-04 - Reimb for 2 trips 2 nights @ 147/night + parking fee				
3748.85 SUB-TOTAL				\$ 3748.85
TOTAL (If last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
07/15/04	ID# CK#0301	Treasure of the State of Iowa State Capitol Des Moines, Ia 50309	Pins for CSG conference	\$ 40.00
07/15/04	ID# CK#0302	Quality Inn and Suites Des Moines, Ia. 50309	fee for fundraiser	76.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 116.00
TOTAL (If last page of this schedule)				\$ 3864.85

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)